Board of Health attached  Zoning  EPA attached  Water City   Well   Sewer Septic   Address  Located on the Side of Legal Description of Property _	Phone # 4		MIT  as d. 28 419-213-2992 City/Vil/Twp and		ood - 
Parcel I.D. #					
Owner	wner_		ress		
Phone Number	City	State	Zip		
Builder	Street Address		ress		
Phone Number	City	State	Zip		
Designer/Architect/Engineer					
1 – Specific Occupancy  4 – Estimated Construction Cos  5 – Class of Work – New  6 – Description of Work  7 – Other Installations – Elector	t \$ Demo	olition Repared to the Repared	Fire Suppression  Dection Fee \$ 30.00  = \$  TO	Fireplace or Fire Alarm AC	
Warning-The approval of plans procured employee of this division does not legalize IN CONSIDERATION OF THE GRA cover and agree to construct said work in statements as made are correct and true, and	by misrepresentation of facts or any illegal construction or arranger INTING OF THIS PERMIT, I all respects in compliance with the I that all orders of Division of Luca	conditions, misstatements ment. I, or we, agree to save the G ne provisions of the Statute as County Building Regular	in application or through n County of Lucas, harmless fr s of the State of Ohio and the tions will be complied with.	om any and all damages, I, or we, do he Lucas County Building Code, and the	cer or nereby
Name of Owner			Owners Agent		—